

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>BLW</i>	<i>67814</i>	<i>5/25/00</i>
O.I.P.E. CLASSIFIER	<i>NH</i>	<i>617</i>	<i>7-14-00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Best Available Copy

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
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41	✓
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45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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